of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that most of the blood collection in our country is being done from the professional donors;

(b) what are the reasons for not improving blood collection and also popularising the use of disposable syringes by subsiding their use;

(c) whether it is a fact that the recommendations of ICMR on blood related diseases have been ignored by his Ministry; and

(d) what specific steps being taken in 1990 to combat blood based diseases, like AIDS etc.?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI RASHEED MASOOD): (a) The annual collection of blood in the country is 19.5 lakh units out of which only 29% of blood is collected from professional donors.

(b) The blood collection could only be improved through motivation, publicity and education of masses for voluntary blood donation. Financial assistance is being provided by the Government to voluntary organisations for this purpose. It is also proposed to introduce schemes to provide financial assistance to Indian Red Cross Society and voluntary organisations for organising camps, and wherever feasible, for operating centralised blood banks. The Government has also recommended usage of disposable plastic bag system for collection of blood. Popularising the use of syringes by providing subsidies is to be considered by the concerned State Governments. The Government have already issued administrative guidelines in this regard.

(c) No. This Ministry has taken up the recommendations made by ICMR regarding transfusion-transmitted disease by drawing up the programme for improvement of blood banking system and action plan for blood donor screening.

(d) Noting the progressive increase of sero-positivity, a phased action plan to screen blood donors was prepared and put into operation from 1989. Testing facilities are not available in 27 cities besides the 4 metropolitan cities where all the blood banks have been linked with zonal blood testing centres for ensuring that the blood used for transfusion is free from HIV antibodies. In the next phase of the programme, 37 zonal blood testing centres linked with blood banks will be established in 16 States. The ultimate objective is to link all the blood banks with the zonal blood testing centres in a phased manner so that safe blood is available for transfusion.

Liability on Glybenclamide

2844. SHRI H. HANUMANTHAPPA :
SHRI DHULESHWAR MEENA:

Will the Minister of PETROLEUM AND CHEMICALS be pleased to refer to the answer to Starred Question 5 given in the Rajya Sabha on the 30th April, 1990 and state:

(a) whether his Ministry has calculated final liability against M/s. Hoechst on Glybenclamide;

(b) if so, what are the details thereof and if not, by when the final liability would be communicated to M/s. Hoechst;

(c) whether it is a fact that he has gone back in his promise of bringing Glybenclamide under price control;

(d) whether it is also a fact that Standing Committee has found

that Glybenclamide does not fulfil any exclusion criteria of the Kelkar Committee;

(e) whether it is a fact that due to non-inclusion of Glybenclamide under price control, producer is able to overcharge the consumer by Rs. 8 crores;

(f) if so, by when the drug would be included under price control list; and

(g) what is the quantity of Glybenclamide tablets sold by M/s. Hoechst after the decontrol of drug?

THE MINISTER OF PETROLEUM AND CHEMICALS (SHRI M.S. GURUPADASWAMY): (a) and (b) Liability of M/s. Hoechst India Ltd. in respect of Glybenclamide upto December, 1983 would be finalised after getting the full details from the company which are awaited.

(c) and (d) Recommendations of the Standing Committee in respect of Glybenclamide are still under consideration of the Government.

(e) and (f) The turnover of individual formulations is not monitored by the Government and so long as Glybenclamide is outside price control manufacturer is free to charge its own price without any prior approval from the Government.

(g) The recommendation of the Standing Committee in this behalf is under consideration of the Government.

Popularising use of Turmeric

2845. SHRI SHAMIM HASHMI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Scientists of National Institute of Nutrition have recently found Turmeric to have anti-cancer properties;

(b) whether large scale field trials have been done on human beings to establish the efficacy of the herb if so, what are the details of the findings; and

(c) what measures are being taken/proposed to popularise use of this herbal preparation for our health care system?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI RASHEED MASOOD): (a) Studies conducted at the National Institute of Nutrition (ICMR), Hyderabad have shown that turmeric has anti-mutagenic effect in animals.

(b) A pilot study in smokers using turmeric tablets revealed that it can reduce mutagenic substances in urine. Large scale field studies havenot been undertaken. It is necessary to do more studies before this can be appiled to human beings.

(c) The Central Council for Research in Ayurveda and Siddha has made efforts to popularise its clinical application in simple forms through the books on home remedies and herbal medicines and other publications.

Eradication of Guineaworm Disease

2846. SHRI SHAMIM HASHMI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether it is a fact that 128 lakh people are affected by Guineaworm every year in India as reported in Pioneer Lucknow of 29th June, 1990 ;

(b) if so, what are the State-wise figures of incidence during the last three years, year-wise ;

(c) whether Government have worked out any plan to eradicate